	PAIENI	Effe	ctive Octo			ION RECO	RD	1	0-8	<i>o</i> n .	ایرو۔		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER TH					
T	OTAL CLAIMS	S		12			RA			OR T		ENTITY	
FOR			NUMBER FILED		NUMBER EXTRA		-	FEE	FEE 385.00		BASIC FEE	FEE 770.00	
T	OTAL CHARGE	13 "	3 minus 20=		* 0		_		400		770:00		
INDEPENDENT CLAIMS			2 minus 3 =		*	• 0		9=		OR	X\$18=		
MULTIPLE DEPENDENT CLAIM P							X4	3=		OR	X86=	<u> </u>	
_						+14	5=		OR	+290=			
*			less than zero, enter "0" in column 2				ТОТ	AL	385	OR	TOTAL		
CLAIMS AS AMENDED - PART II								OTHER THAN					
	(Column 1) (Column 2) (Column CLAIMS HIGHEST					(Column 3)	SMA	LLE	NŢITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA	· RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total .	*	Minus	**		=	X\$ 9)=		OR	X\$18=		
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						.14	7					
					•		+145	TAL		OR	+290=		
		<u>.</u>	•				ADDIT.			OR ,	TOTAL ADDIT. FEE		
	·	(Column 1)	T	(Colum HIGHE		(Column 3)							
MENDMENT B		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA	RAT		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	X\$ 9	=		OR	X\$18=		
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							Ĺ						
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ביי		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column HIGHES NUMBE PREVIOU PAID FO	R SLY	(Column 3) PRESENT EXTRA	101	AL EEE TI	ADDI- IONAL	OR	TOTAL DDIT, FEE	ADDI- TIONAL	
- 1	Total	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGHES NUMBE PREVIOU	ST ER SLY OR	PRESENT	ADDIT. F	AL EEE	ADDI- IONAL FEE	OR OR	TOTAL DDIT, FEE	ADDI-	
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MENDMEN	Total Independent	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGHES NUMBE PREVIOU PAID FO	ST ER SLY DR	PRESENT EXTRA	ADDIT. F	AL EEE	ADDI- IONAL FEE	OR OR	TOTAL DDIT, FEE	ADDI- TIONAL	
* AMENOMEN	Total Independent FIRST PRESEI	CLAIMS REMAINING AFTER AMENDMENT * * NTATION OF MU	Minus LTIPLE DEP	HIGHES NUMBE PREVIOU PAID FO	ST R SLY DR	PRESENT EXTRA	TOTADDIT. F RATE X\$ 9= X43= +145=	AL FEE	ADDI- IONAL FEE	OR A	TOTAL DDIT, FEE RATE X\$18=	ADDI- TIONAL	
AMENDIMENT	Total Independent FIRST PRESEI the entry in column the "Highest Num the "Highest Num	CLAIMS REMAINING AFTER AMENDMENT	Minus LTIPLE DEP e entry in colur d For IN THIS	HIGHES NUMBE PREVIOU PAID FO	ST R ISLY DR CLAIM	PRESENT EXTRA = = = 20, enter *20.	RATE X\$ 9= X43= +145= TOTA ADDIT. FE	AL EEE	ADDI- IONAL FEE	OR A	TOTAL DOTT, FEE RATE X\$18= X86= +290= TOTAL DOTT, FEE	ADDI- TIONAL	

Application or Docket Number